Rossie Youth Accommodation Services
School Care Accommodation Service
Rossie Youth Accommodation Services
Montrose
DD10 9TW

Inspected by: Lynn Ellison
Type of inspection: Unannounced
Inspection completed on: 31 January 2013
Contents

Summary 3
1 About the service we inspected 5
2 How we inspected this service 6
3 The inspection 10
4 Other information 18
5 Summary of grades 19
6 Inspection and grading history 19

Service provided by:
Rossie Young People’s Trust

Service provider number:
SP2003000292

Care service number:
CS2007166360

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

<table>
<thead>
<tr>
<th>Area</th>
<th>Grade</th>
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</thead>
<tbody>
<tr>
<td>Quality of Care and Support</td>
<td>N/A</td>
</tr>
<tr>
<td>Quality of Environment</td>
<td>N/A</td>
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<tr>
<td>Quality of Staffing</td>
<td>5</td>
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<tr>
<td>Quality of Management and Leadership</td>
<td>5</td>
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</tbody>
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What the service does well

We found the following key strengths in the areas we inspected:

- continued use of a wide range of methods for consulting and involving young people in service development and improvement;
- provision of ready access to independent sources of support and advocacy for young people, which is an important element in creating a safe and open culture;
- staff who are good role models for young people, and who show interest in and commitment to their progress and well-being;
- very good staff support and development;
- a commitment to continuous improvement.

What the service could do better

The service should:

- complete the development of its improvement plan;
- more clearly demonstrate how staffing levels and deployment on each shift take into account the assessed needs of young people.
What the service has done since the last inspection
The service had developed a programme of food hygiene training for staff which is due to roll out in the near future.

Conclusion
We found major strengths in all the areas we inspected. The Rossie residential service continues to listen to and involve young people and others with an interest in the service. Staff and line managers are committed to providing young people with high standard of care and do so with skill, sensitivity and good humour. The service supports the staff group by means of supervision and meets their learning and development needs. The service is committed to continuous improvement.

Who did this inspection
Lynn Ellison
1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. It awards grades based on the findings of inspections. These grades, including any that services were previously awarded by the Care Commission, can be found on the Care Inspectorate’s website - www.careinspectorate.com

Rossie Youth Accommodation Services is a school care accommodation service provided by Rossie Young People’s Trust, an incorporated association and registered charity. The Trust, which also provides a secure accommodation service on the same site, is managed by a board of governors. The service offers a total of 14 places for young people aged up to 18.

The establishment is situated in a rural location approximately five miles from Montrose. The ‘residential campus’ comprises two close support units (Annan House and Esk House), the former with four and the latter with six places, and an additional four places in Forth House. Each close support unit has single bedrooms with en suite toilet and shower facilities, an open plan living and dining room, staff office, kitchen and two smaller rooms for young people to use. Forth House has four single bedrooms, two shower rooms, a kitchen diner and two lounges. On-site education is provided in an open learning centre currently undergoing the latter stages of development. The service is situated in extensive gardens and grounds.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - N/A
Quality of Environment - N/A
Quality of Staffing - Grade 5 - Very Good
Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.
2 How we inspected this service

The level of inspection we carried out
In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection
We wrote this report following an unannounced inspection by Lynn Ellison, Inspector. Nine young people were staying in the service during the inspection, which took place on the following days in 2013:

- Wednesday 30 January between 10:25am and 17:35pm;
- Thursday 31 January between 09:05am and 16:20am.

We gave feedback to managers on the second day of the inspection.

As requested, the service submitted an annual return and self-assessment before the inspection.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

- evidence from the service’s most recent self-assessment;
- children’s records;
- complaints records;
- results of various consultation activities carried out by the service with young people, parents and carers and social workers;
- staff induction evidence;
- records of accidents, incidents and restraints;
- newsletters;
- young people’s meeting records;
- training records;
- records of governors’ meetings;
- discussions with managers, staff and young people.
Grading the service against quality themes and statements

We inspect and grade elements of care that we call ‘quality themes’. For example, one of the quality themes we might look at is ‘Quality of care and support’. Under each quality theme are ‘quality statements’ which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services’ responsibilities for fire safety at www.firelawscotland.org
What the service has done to meet any recommendations we made at our last inspection

The chef had planned training in food hygiene for care staff. This was due to be completed by the end of March 2013 as outlined in the service’s action plan.

See Statement 3.3 for details of the plans in place for behaviour management and restraint training for staff.

The annual return

Every year all care services must complete an ‘annual return’ form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a ‘self assessment’ form telling us how their service is performing. We check to make sure this assessment is accurate.

The service had provided a fully completed self assessment earlier in the year before the first inspection. This identified where the service thought they performed well, and their plans for further improvement and development.

Taking the views of people using the care service into account

Of the nine young people placed in the open campus, three did not want to speak to us to give us their views of Rossie. One was out at school. We asked staff to let the other young people know that we were doing an inspection and that we would be very happy to speak to them in private, but none took the opportunity. However we also spent time with young people in Esk House and had a meal there with them. We also joined the young people’s meeting and were able to chat with them and listen to their views.
Taking carers' views into account

We did not have the opportunity to speak to any parents or carers during our visits but we did speak to one visiting professional, who made a number of very positive comments about the service. This person felt the service had some excellent staff and that managers were accessible and took suggestions on board.
3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support - NOT ASSESSED
Quality Theme 2: Quality of Environment - NOT ASSESSED
Quality Theme 3: Quality of Staffing
Grade awarded for this theme: 5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths
The service performed to a very good standard in this area and had major strengths. We came to this conclusion after reviewing written records, speaking to staff, and attending a young people’s meeting.

The service used a wide range of methods to obtain the views of young people and parents and carers, make improvements and involve them in developments relating to staffing issues (as well as the quality of care and support, which we commented on at the previous inspection). Examples of these were:

- ready access to independent advocacy services including Who Cares? Scotland, children’s rights officers and social workers. This is an important element of safe caring as it provides young people with contact with people outside the service. Rossie has a contractual agreement with Who Cares? which demonstrates their commitment to transparency and supporting children to have their say;
- various forums giving young people a say in the operation of the service such as a Young People’s Council chaired by a senior manager and attended by the Who Cares? worker, and young people’s meetings. We attended one of the latter and felt that it was managed very effectively and sensitively by staff, who encouraged young people to air their views in an acceptable way. We came across several examples where the service had listened to and acted on young people’s views and requests. Young people commented that staff were getting better at applying ‘rules’ more consistently. During this meeting there was also a discussion on some of the principles of the National Care Standards, for example staff giving young people privacy;
- young people had for a number of years routinely been involved in recruiting and selecting staff in the service;
one team used ‘survey monkeys’ (a web-based survey) to obtain young people’s views. Managers made use of these to monitor the quality of staff and care practices;

• questionnaires for young people, parents and carers and social workers allowed the service to find out their views about different aspects of the service, including staff. We confirmed that where issues were raised by a social worker for example, someone from the service made contact for further discussion so that changes could be made. The service told us that as a result of this feedback they were planning some ‘customer care’ training;

• the service’s complaints process was effective and responsive to concerns raised by young people.

Areas for improvement
There was no need for the service to make any significant adjustments in this area.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3
We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths
The service’s performance had major strengths in this area.

We identified the following:

• overall, staff formed very good relationships with young people in their care. They made good use of humour, demonstrated an understanding of individual differences and needs, and showed an interest in their lives. They were alert to potential difficulties and made efforts to de-escalate tensions. We were present when a staff member very effectively weighed up a tense situation and made a decision about staff deployment based on meeting the young person’s needs and avoiding the situation deteriorating. This led to a very good outcome;

• the service had a large staff group with varied skills and backgrounds which provided young people with a range of opportunities to learn and form relationships of benefit to them. This included for example catering staff and tradespeople who were able to play a part in the support programme and pass on their skills;
• the service had a comprehensive induction programme for new staff who were also asked to evaluate its effectiveness. Following appointment staff received three-, six- and nine-monthly appraisals to monitor their progress;
• the service had an effective system for ensuring that staff were registered with the Scottish Social Services Council. Managers had given staff very good, individualised support to obtain the necessary qualifications, showing commitment to them;
• established staff acted as mentors to new staff. We received a positive comment about this from one new staff member who had found this very beneficial;
• there was a varied and relevant training programme including mandatory and more specialised courses. Lots of staff commented on how good the ‘Trauma Recovery’ training had been and how it had increased their understanding of young people’s experiences;
• staff told us that they received very good quality support from managers, including formal supervision, whom they described as very good role models. Relationships between care staff, supervisors and line managers in the residential campus were very good;
• the service had retained its ‘Investors in People’ award, a national business improvement framework focusing on effective leadership and management and involving and developing staff;
• the service made use of different methods of communicating with staff, including e-mail and occasional newsletters which celebrated staff achievements, for example obtaining qualifications. Staff meetings gave staff the opportunity to discuss their work and put forward suggestions. The process of reviewing policies and procedures had involved staff, who were given the opportunity to make comments and suggestions;
• staff had access to reading material to allow them to keep up to date with new developments;
• the service had drawn up a plan to address our concerns about staff training in managing challenging behaviour and restraint (known as CALM)

Areas for improvement

Some staff felt that whilst communication was on the whole quite effective and had improved, some things were still ‘missed’ between the three care teams. This was perhaps a reflection of the fact that ‘a lot happens’ in the short period between staff finishing a series of shifts, having rest days and returning to work.

One person commented that e-mail communication could be impersonal and felt that more direct contact with senior managers would be a useful addition.
Grade awarded for this statement:  5 - Very Good

Number of requirements:  0

Number of recommendations:  0
Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme:  5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths
We did not inspect against this statement but have included relevant evidence on the quality of participation in Statement 1.3.

Areas for improvement
See Statement 3.1

Grade awarded for this statement:  5 - Very Good
Number of requirements:  5
Number of recommendations:  0

Statement 4
We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths
The service reached a very high standard in this statement, and demonstrated major strengths in relation to quality assurance.

In addition to those methods for promoting participation outlined in Statement 3.1, we identified the following quality assurance processes:

- all managers had designated responsibilities in the new quality assurance programme, the implementation of which had begun in the service. This reflected the intention to ensure a wide ownership of the improvement process. There were regular meetings to monitor the progress of implementation. A site visit by the company contracted to oversee the process was due to take place and would provide an important element of independent oversight;
• there were opportunities for staff to contribute to service development and improvement. An example of this was in the on-going review of policies and procedures;
• the service had an effective system for monitoring incidents. We saw an example where a review of a decision about the use of a sanction against a young person led to changes;
• systems for regular checks by managers of the safety and upkeep of the environment were effective;
• staff rated the quality of supervision highly. Regular supervision allowed managers to monitor practice and learning and development needs;
• the residential campus manager monitored the frequency and quality of supervision of staff;
• the service promptly informed us of significant events in the service;
• managers had given staff an opportunity to contribute to the development of the self-assessment submitted by the service before the inspection;
• members of the board of governors visited the service on a monthly basis to speak to staff and young people and reported their findings to the board.

Areas for improvement
The service needs to more clearly demonstrate how staffing levels and deployment on each shift take into account the assessed needs of young people (see Requirement 1, Statement 4.4). This is something introduced by the Care Inspectorate relatively recently and can be found in guidance on records all registered services must keep.

The service had begun to develop a draft improvement plan for the period 2013-2015 which had identified key priorities and objectives for most of the service areas. The intention was to share this with the staff team in the near future.

Grade awarded for this statement: 5 - Very Good
Number of requirements: 1
Number of recommendations: 0

Requirements
1. The provider must:
   (i) keep a record of the assessment of young people’s needs that identifies staffing levels and deployment on each shift over a four-week period;
   (ii) make the above available to any visitors to the service and those using it.
   This is in order to comply with SSI 2011/210 Regulation 15(a) and SSI 2011/28 Regulation 4(a)
   Timescale for implementation: within six weeks of receipt of this report
4 Other information

Complaints
No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements
We have taken no enforcement action against this care service since the last inspection.

Additional Information
Not applicable.

Action Plan
Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).
## 5 Summary of grades

<table>
<thead>
<tr>
<th>Quality of Care and Support - Not Assessed</th>
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<tr>
<td>Quality of Environment - Not Assessed</td>
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<td>Quality of Staffing - 5 - Very Good</td>
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<td>Statement 1</td>
</tr>
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<td>Statement 3</td>
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<td>Quality of Management and Leadership - 5 - Very Good</td>
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<tr>
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<td>Statement 4</td>
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## 6 Inspection and grading history

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<th>Date</th>
<th>Type</th>
<th>Gradings</th>
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<td>20 Nov 2012</td>
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<td>Environment 5 - Very Good</td>
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<td></td>
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<td>Staffing 4 - Good</td>
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<td>Management and Leadership Not Assessed</td>
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All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.
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